



# APPLICATION TO LEASE

Please complete a separate application for each person over 18 years of age. Please fill out and complete all questions and areas of information. N/A is not acceptable.

Name: \_\_\_\_\_  
LAST FIRST MIDDLE INIT.

a/k/a, If Other Than Legal Name: \_\_\_\_\_

Driver's License or Govt. Issued Identification No.: \_\_\_\_\_ State: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Social Security No./ Individual Tax I.D. No.: \_\_\_\_\_  
Month - Day - Year

Home Phone #: (\_\_\_\_) \_\_\_\_\_ Work Phone #: (\_\_\_\_) \_\_\_\_\_ Cell Phone #: (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

Current Address: \_\_\_\_\_  
Street Unit # City State ZIP Code

How Long?  
From (Month/Year): \_\_\_\_\_ To: \_\_\_\_\_ Last Rent Paid Month: \_\_\_\_\_ Amt: \$ \_\_\_\_\_

Owner/Manager: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Owner/Manager Email Address: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

### 1<sup>st</sup> Previous Address

Address: \_\_\_\_\_  
Street Unit # City State ZIP Code

How Long?  
From (Month/Year): \_\_\_\_\_ To: \_\_\_\_\_ Last Rent Paid Month: \_\_\_\_\_ Amt: \$ \_\_\_\_\_

Owner/Manager: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Owner/Manager Email Address: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

### 2<sup>nd</sup> Previous Address

Address: \_\_\_\_\_  
STREET UNIT # CITY STATE ZIP CODE

How Long?  
From (Month/Year): \_\_\_\_\_ To: \_\_\_\_\_ Last Rent Paid Month: \_\_\_\_\_ Amt: \$ \_\_\_\_\_

**CURRENT EMPLOYMENT**

Company Name: \_\_\_\_\_ Address: \_\_\_\_\_

Company Phone #: \_\_\_\_\_ Occupation: \_\_\_\_\_ Type of Business: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_

Employment Date - From: \_\_\_\_\_ To: \_\_\_\_\_ Monthly Salary: \_\_\_\_\_

**PREVIOUS EMPLOYMENT:**

Company Name: \_\_\_\_\_ Address: \_\_\_\_\_

Company Phone #: \_\_\_\_\_ Occupation: \_\_\_\_\_ Type of Business: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_

Employment Date - From: \_\_\_\_\_ To: \_\_\_\_\_ Monthly Salary: \_\_\_\_\_

Applicant represents that the statements made are true and correct and authorizes Owner's verification of credit, income and references; and **APPLICANT UNDERSTANDS AND AGREES THAT ANY MISREPRESENTATION AND/OR OMISSION IS GROUNDS FOR EVICTION.** Applicant agrees to pay for said credit verification. Such payment is a part of the application process and is a charge for the administrative costs of application consideration. If Applicant pays by a personal check which is returned "NSF", applicant shall be liable for the charge on demand. The undersigned makes application to rent housing accommodations designated as follows:

When do you plan to move-in? Date: \_\_\_\_\_, 20\_\_\_\_

I hereby apply to rent / lease Apartment No. \_\_\_\_\_ at \_\_\_\_\_

for \$ \_\_\_\_\_ per month and upon approval of my Application and signed Rental Agreement, I further agree to pay the first month's rent of \$ \_\_\_\_\_ and a security deposit in the amount of \$ \_\_\_\_\_.

Applicant understands and agrees that investigative consumer report may be made regarding the consumer's character, general reputation, personal characteristics, and mode of living. If applicant wishes to receive a copy of any consumer credit bureau or background reports prepared, please check the following box:  The name and address of the investigative consumer reporting agency that will prepare the report and a summary will be as follows.

ZipReports  
a Division of AAA Credit Bureau, Inc.

PO Box 7248 Northridge, CA 91327

**Name of Reporting Agency**

**Address of Reporting Agency**

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

**For purposes of credit and rent liability only: LIST ALL ADDITIONAL OCCUPANTS WHO WILL OCCUPY UNIT. Please put "F" for full time or "P" for part time after each name.**

If this box is checked there shall be no additional occupant(s).

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

**Additional Information:**

1. Have you ever had any credit problems?

YES  NO

2. Have you ever had an unlawful detainer filed against you?

YES  NO

3. Have you ever been evicted for non-payment of rent for any other reason?

YES  NO

4. Have you ever filed for bankruptcy?

YES  NO

5. Have you ever been convicted of a felony?

YES  NO

6. Do you have any animals?

YES  NO

If Yes, how many? \_\_\_\_\_ Describe: \_\_\_\_\_

7. Will you be using any water-filled furniture in your residence?

YES  NO

If Yes, do you have insurance coverage?

YES  NO

8. Do you have any musical instruments?

YES  NO

If Yes, what kind? \_\_\_\_\_

9. Do you smoke?

YES  NO

9b. Does any other proposed occupant smoke?

YES  NO

10. Is Applicant utilizing a Reusable Tenant Screening Report as defined California Assembly Bill 2559 (2022)?  YES  NO

**If a Reusable Tenant Screening Report is being utilized, then Applicant, under penalty of perjury, hereby affirms that there has not been a material change to the information contained in the Reusable Tenant Screening Report.**

11. Please explain any "YES" answers other than for Item 10. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Banking Information:**

Name of Bank or Credit Union: \_\_\_\_\_ Branch or Address: \_\_\_\_\_

Checking #: \_\_\_\_\_ Approx. Bal.: \$ \_\_\_\_\_

Savings #: \_\_\_\_\_ Approx. Bal.: \$ \_\_\_\_\_

Name of Bank or Credit Union: \_\_\_\_\_ Branch or Address: \_\_\_\_\_

Checking #: \_\_\_\_\_ Approx. Bal.: \$ \_\_\_\_\_

Savings #: \_\_\_\_\_ Approx. Bal.: \$ \_\_\_\_\_

Other Sources of income: \_\_\_\_\_

**Credit References (Credit Cards/Car Payments/Other Loans):**

Company Name: \_\_\_\_\_ Address/City: \_\_\_\_\_

Account #: \_\_\_\_\_ Present Balance: \$ \_\_\_\_\_ Monthly Payment: \$ \_\_\_\_\_

Company Name: \_\_\_\_\_ Address/City: \_\_\_\_\_

Account #: \_\_\_\_\_ Present Balance: \$ \_\_\_\_\_ Monthly Payment: \$ \_\_\_\_\_

Company Name: \_\_\_\_\_ Address/City: \_\_\_\_\_

Account #: \_\_\_\_\_ Present Balance: \$ \_\_\_\_\_ Monthly Payment: \$ \_\_\_\_\_

Company Name: \_\_\_\_\_ Address/City: \_\_\_\_\_

Account #: \_\_\_\_\_ Present Balance: \$ \_\_\_\_\_ Monthly Payment: \$ \_\_\_\_\_

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**Emergency Contact:**

**Name:** \_\_\_\_\_ **Address:** \_\_\_\_\_  
**Relationship:** \_\_\_\_\_ **Phone #:** (\_\_\_\_) \_\_\_\_\_

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**Vehicles (Operable Automobiles including Trucks, Vans, Motorcycles):**

Are you a registered owner?

YES  NO

If NO, who? \_\_\_\_\_

**Year:** \_\_\_\_\_ **Make:** \_\_\_\_\_ **Model:** \_\_\_\_\_ **Color:** \_\_\_\_\_ **License #:** \_\_\_\_\_ **State:** \_\_\_\_\_

**Year:** \_\_\_\_\_ **Make:** \_\_\_\_\_ **Model:** \_\_\_\_\_ **Color:** \_\_\_\_\_ **License #:** \_\_\_\_\_ **State:** \_\_\_\_\_

**Year:** \_\_\_\_\_ **Make:** \_\_\_\_\_ **Model:** \_\_\_\_\_ **Color:** \_\_\_\_\_ **License #:** \_\_\_\_\_ **State:** \_\_\_\_\_

**Notice:** Under California law, applicants receiving a government rent subsidy have the option, at the applicant's discretion, of providing lawful, verifiable, alternative evidence of the applicant's reasonable ability to pay tenant's portion of the rent. This includes, without limitation, government benefit payments, pay records, and bank statements. If an eligible applicant elects to submit alternative evidence, we will consider this alternative evidence in lieu of obtaining the applicant's credit history.

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**Notice Regarding Background Investigation Pursuant to California Law  
(For California Applicants Only)**

You are hereby notified that by completing this application process, you acknowledge that we may obtain information about you from an investigative consumer reporting agency (ICRA). Such information may include information about your character, general reputation, personal characteristics, and mode of living. With respect to any investigative consumer report from an investigative consumer reporting agency ("ICRA"), we may investigate the information contained in your application and other background information about you, including but not limited to, your criminal history, driving records, or other information about you. This information and any reports about you may be used as a factor in making a housing decision. The source of any investigative consumer report (as that term is defined under California law's "Investigative Consumer Reporting Agencies Act") will be the person(s) or entities set forth below.

**Name of Individual or Entity:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
*Apt. No.*                      *Address*

\_\_\_\_\_  
*City*    California                      \_\_\_\_\_  
*Zip Code*

**Telephone:** (\_\_\_\_) \_\_\_\_\_